

DEDCOMAI

26379 Fremont Rd. Los Altos Hills, CA 94022 (650)941-7222 FAX (650)941-3160

APPLICATION FOR EMPLOYMENT

Position desired:	

An Equal Opportunity Employer - The Town of Los Altos Hills is an equal opportunity employer, and does not and will not discriminate on the basis of race, religion, national origin, sex, age, disability, marital status, or status as a disabled veteran. Information provided on this application will not be used for any discriminatory purpose.

Please read carefully and provide all information requested.

A résumé may not be submitted in lieu of a completed Town of Los Altos Hills application for employment⁽¹⁾.

FERSONAL				
Full Legal Name:			Ag	e (if under 18)
Last	Fin		M.I.	
Address				
Number and Street	Apt/Suite No.	City	State	Zip
Home Phone	Mobile Phone		E-mail Address	
Do you have a valid driver's	license? Yes	No Licens	se No	State Issued
record is not an automatic bar to en Do you have any relatives en				
				1
Are you willing and able to	respond to nighttime	or weekend emerge	encies?	
Former Legal Name:				
Last	Fit	st	M.I.	

- (1) Incomplete applications will be destroyed without notification to the applicant. Complete applications may be retained in the Town's recruitment files for two (2) years from the date of application. You may submit a new application at any time.
- (2) You may exclude convictions that have been sealed, expunged or eradicated, misdemeanor convictions for which probation has been completed, and certain marijuana convictions set out in California Labor Code Section 432.8.

EDUCATION – Please provide information of all schools attended, starting with high school. Use additional sheets as necessary. If selected as a finalist, applicant will be required to provide official transcripts for all post-secondary education.

		Years	Degree/ Diploma	Credits / Unit	
School Name	City, State	Attended	Conferred	Hours	Primary Area of Studies

PROFESSIONAL SKILLS	& ABILITIES
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Machines	or	equipment	qualified to	operate:

Computer skills (hardware and software):

Other skills that would qualify you for position sought:

LICENSES & ASSOCIATIONS

Professional licenses, registrations, associations:

PROFESSIONAL REFERENCES - List three (3) professionals who are well acquainted with your workplace qualifications. These references will not be contacted without your prior consent.

Name	Address	Telephone No.	Relationship
Name	Address	Telephone No.	Relationship
Name	Address	Telephone No.	Relationship

EXPERIENCE - Please provide a complete work history for the past fifteen (15) years or since your final year of schooling, whichever is most recent starting with current or most recent employer. Use additional sheets as necessary. Explain any gaps during this period. "See Résumé" in lieu of completing this section or omitting any information requested may disqualify this application from consideration. _____ From _____ To ____ Name of Employer Salary _____ Street City and State _____ May we contact? _____ Telephone _____ Supervisor: Name/Title Your title and duties ___ Reason for leaving _____ From _____ To _____ Name of Employer Salary _____ Start Street City and State ____ May we contact? ____ Telephone ____ Supervisor: Name/Title Your title and duties ___ Reason for leaving _____ From _____ Name of Employer Salary _____ City and State Street _____ May we contact? ____ Telephone ____ Supervisor: Name/Title Your title and duties _____ Reason for leaving _____ From_____ To ____ Name of Employer __ Salary ____ City and State Street _____ May we contact? ____ Telephone ___ Supervisor: Name/Title Your title and duties _____

Reason for leaving ___

ADDITIONAL INFORMATION
AGREEMENT
I hereby certify that the information contained in this application form is true and correct to the best of my knowledge and agree to have any of the statements checked by the Town unless I have indicated to the contrary. I authorize the references listed above to provide the Town any and all information concerning my previous employment and any pertinent information that they may have. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to the Town as well as from the use or disclosure of such information by the Town or any of its agents, employees, or representatives. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer or, if I am hired, in my dismissal from employment.
Applicant Signature Date
OPTIONAL INFORMATION:
To assist in future recruitment efforts, please indicate where you saw this job listed:
☐CalOpps.org
Newspaper/Publication (please specify):
Websites of professional organizations (please list):
Other online job board (please specify):
Town of Los Altos Hills website